PERMITTEE NAME/ADDRESS:

NATIONAL POLLUTANT DISCHARGE FLIMINATION SYSTEM (NPDES)

Form Approved OMB No. 2040-0004

ANCHORAGE, MUNICIPALITY OF

3000 ARCTIC BLVD.

ANCHORAGE

AK 99503-3898

DISCHARGE MONITORING REPORT (DMR) AK0022551 PERMIT NUMBER

001 A DISCHARGE NUMBER

MAJOR (SUBR 02) È - FINAL

FACILITY:

NAME:

ADDRESS:

JOHN M. ASPLUND WWTF----301 (H)

LOCATION: ANCHORAGE AK 99502 ATTN:

MONITORING PERIOD 07 | 07 | 01 07 | 07 | 31 TO FROM

*** NO DISCHARGE

Forms by WindowChem(707)864-0845;p/n11090;v5.01;4/1/96. Rev. 1/05, BN

								rustions before		 mpleting this	c form
	L. CEN WOR	ITITY OR LOADING	Y OR LOADING		QUANTITY OR CON	luctions ben]	FREQUENCY	1		
PARAMETER				ı				т—	NO.	OF ANNUAGE	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNIT	<u>-</u> ^	ANALYSIS	LIPE
TEMPERATURE, WATER	SAMPLE MEASUREMENT	*****	*****	***	*****	*****	14.2	(04)	N/A	FOUR/	GRAB
DEG. CENTIGRADE			and an arrangement of] (3.)	10111111	VVEEK	313333333333
00010 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	***** <u> </u>			ika kikik ik	*****	REPORT MAXIMUM	DEG.C		FOUR/ WEEK	GRAB
TEMPERATURE, WATER	SAMPLE								(61)	FOUR/	
DEG. CENTIGRADE	MEASUREMENT	****	46 1 7 200		*****	*****	14.8	(04)	N/A	WEEK	GRAB
00010 1 0 0	PERMIT				*****	米米米米米	REPORT			FOUR/	GRAB
EFFLUENT GROSS VALUE	REQUIREMENT		**************************************	****			MAXIMUM	DEG.C		WEEK	UNAD
OXYGEN, DISSOLVED	SAMPLE MEASUREMENT	OFFICE O	COMPLIANCE AND ENFO	RCEMENT	0.5	*****	*****	(19)	N/A	FOUR/	GRAB
(DO)	PERMIT	idianaman						, (,	240141401	WEEK 1)	100000000000000000000000000000000000000
00300 1 0 0 EFFLUENT GROSS VALUE	REQUIREMENT	on one one one one	de verte de de de de	****	MOMIN	*****	*****	MG/L		FOUR/ WEEK	GRAB
BOD, 5-DAY	SAMPLE									FOUR/	
(20 DEG. C)	MEASUREMENT	60233	*****	(26)	*****	279	*****	(19)	N/A	WEEK	COMP24
00310 G 0 0	PERMIT	REPORT				REPORT				FOUR/	COMP
RAW SEW/INFLUENT	REQUIREMENT	MO AVG	********	LBS/DY	济朱老朱亲 荣	MO AVG		MG/L		WEEK	24
BOD, 5-DAY	SAMPLE MEASUREMENT	*****	43421	(26)	*****	*****	204	(19)	0	FOUR/	COMP24
(20 DEG. C) 00310 W 0 0	PERMIT		90100	` ′			300	,	6010106010	WEEK FOUR/	
EFFLUENT GROSS VALUE	REQUIREMENT	****	DAILYMX	LBS/DY	外安安法沙沙	*****	DAILY MX	MG/L		WEEK	24
BOD, 5-DAY	SAMPLE								10000000	FOUR/	1
(20 DEG. C)	MEASUREMENT	38120	42193	(26)	*****	174	199	(19)	0 1	WEEK	COMP24
00310 1 0 0	PERMIT	72100	75100			240	250			FOUR/	COMP
EFFLUENT GROSS VALUE	REQUIREMENT	MO AVG	WKLY AVG	LBS/DY	****	MO AVG	WKLY AVG	MG/L		WEEK	24
PH	SAMPLE MEASUREMENT	*****	*****	****	6.7	*****	7.9	(12)	N/A	FOUR/	GRAB
00400 G 0 0	PERMIT				REPORT		REPORT	` ´		WEEK FOUR!	300000000000000000000000000000000000000
RAW SEW/INFLUENT	REQUIREMENT	*****	****	****	MINIMUM	光光光光光	MAXIMUM	SU		WEEK	GRAB
NAME / TITLE PRINCIPAL EXECUTIVE OFFICER A CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH							TELEPHONE		DATE		
Craig Woolard, P.E., Ph.D. The information submitted herein; and based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted of the first control of the information of the informat								$\neg \neg$		$\neg \neg \uparrow$	
Director, Treatment D	PENALTHES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND SIGNATURE OF PRINCIPAL EXECUTIVE							1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		07/08/00	
			I AND 33 U.S.C. §1319. (Penalties		may înclude fines up to	(907)564-2799 AREA CODE NUMBER		07/08/09 YEAR MO DAY			
THEOORTRINIED			· · · · · · · · · · · · · · · · · · ·			OFFICER OR AUTHO		AREA CODE N	UMBEK	YEAR	IVIO DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

1) D.O. was invalid on 7/2/07 due to a malfunctioning test meter.

1015 09/04/07

PERMITTEE NAME/ADDRESS:

ADDRESS:

ATTN:

NATIONAL POLITITANT DISCHARGE FLIMINATION SYSTEM (NPDES) DISCHARGE MONITORING REPORT (DMR)

Form Approved OMB No. 2040-0004

NAME: ANCHORAGE, MUNICIPALITY OF

3000 ARCTIC BLVD.

ANCHORAGE

AK 99503

MARK PREMÓ P.E. GEN MGR. AWWU

AK0022551 PERMIT NUMBER

001 A DISCHARGE NUMBER

MAJOR (SUBR 02) F - FINAL

FACILITY: JOHN M. ASPLUND WWTF----301 (H)

LOCATION: ANCHORAGE, AK 99502

MONITORING PERIOD 07 | 07 | 01 07 | 07 | 31 TO FROM

*** NO DISCHARGE NOTE: Read instructions before completing this form.

ATTIC. MARKET REMOT	.L. OLIVINOR.	QUANTITY OR LOADING				QUANTITY OR CONCENTRATION					<u> </u>
PARAMETER		QUARTITI OR LUADING					NO.	OF	SAMPLE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNIT	EX	ANALYSIS	TYPE
PH	SAMPLE MEASUREMENT	****	****	****	6.5	****	7.9	(12)	0	FOUR/ WEEK	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT RECKUREMENT	*****	**************************************	****	6.5 MINIMUM	*****	8.5 MAXIMUM	SU		FOUR/ WEEK	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	61529	*****	(26)	*****	284	*****	(19)	N/A	FOUR/ WEEK	COMP24
00530 G 0 0 RAW SEW/INFLUENT	PERMIT REQUIREMENT	REPORT MO AVG	*****	LBS/DAY	法特殊法律的	REPORT MO AVG	\$154.844.	MG/L		FOUR/ WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	25687	(26)	****	*****	122	(19)	0	FOUR/ WEEK	COMP24
00530 W 0 0 EFFLUENT GROSS VALUE	PERMIT REGUIREMENT	*****	57000 DAILY MX	LBS/DAY	**************************************	****	190 DAILY MX	MG/L		FOUR/ WEEK	COMP24
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	14311	17518	(26)	*****	65	80	(19)	0	FOUR/ WEEK	COMP24
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT RECUIREMENT	51000 MO AVG	54000 WKLY AVG	LBS/DAY	****	170 MO AVG	180 WKLY AVG	MG/L		FOUR/ WEEK	COMP24
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	****	sie sie sie sie sie sie	****	oder vile vile oder oder vile	18.8	sie sie viersie sie sie	(19)	N/A	ONCE/ MONTH	COMP24
00610 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	*****	****	***	REPORT MO AVG	*****	MG/L	N/A	MONT	COMP24
FECAL COLIFORM, MPN, EC MED, 44.5C	SAMPLE MEASUREMENT	*****	*IN E	CEI		76	****	(30)	0	THREE/ WEEK	GRAB
31615 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	****		****	<u>j</u>	850 MO GEO	*****	MPN/ 100ML		THREE/ WEEK	GRAB
FLOW IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	26.096	#4.44	6 (03)		*****	*****	****	N/A	CONTIN UOUS	RCORDR
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	MO AVG	OFFICE OF CO	S. EPA REGION MPLIMICEDAND	10 ****** FNEDERCO	*****	*****	****		CONTIN	RCORDR
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN: AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS							TELEPHONE		DATE		
Craig Woolard, P.E., Ph.D. IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION I BELIEVE THE SUBMITTED											
Director, Treatment Division INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. \$1001 AND 35 U.S.C. \$1319. (Penalties under these stantes may include fines up to						(907)564-2799		07/08/09			
TYPED OR PRINTED \$10,000 and or maximum imprisenment of between 6 months and 5 years.) OFFICER OR AUTHORIZED AGENT							AREA CODE NUMBER YEAR MO				
COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

The final effluent autosampler is normally taken off line on Saturdays, Mondays, and Wednesdays for line cleaning for approximately 1.5 hours each time; the composite samples for BODs, TSS, etc. are therefore slightly less than a 24HC on these days.

Form Approved OMB No. 2040-0004

NAME: ADDRESS: ANCHORAGE MUNICIPALITY OF

3000 ARCTIC BLVD **ANCHORAGE**

AK 99503

DISCHARGE MONITORING REPORT (DMR) AK0022551 PERMIT NUMBER

001 A DISCHARGE NUMBER

MAJOR (SUBR 02) È - FINAL

FACILITY:

JOHN M. ASPLUND WWTF---301 (H)

LOCATION: ANCHORAGE, AK 99502

MONITORING PERIOD 07 | 07 | 01 07 | 07 | 31 FROM TO

*** NO DISCHARGE

ATTN: MARK PREMO P.E. GEN MGR. AWWU NOTE: Read instructions before completing this form. QUANTITY OR CONCENTRATION FREQUENCY QUANTITY OR LOADING PARAMETER NΩ SAMPLE FΧ TYPE ANALYSIS **AVERAGE** MAXIMIM LINITS AVERAGE MAXIMIM LINIT MINIMIM CHLORINE TOTAL SAMPLE EVERY -**** **** n GRAB 0.7 (19)MEASUREMENT 3 HRS RESIDUAL 50060 1 0 0 PERME 12 EVERY ***** GRAB REQUIREMENT ***** **** MG/I EFFLUENT GROSS VALUE DAILY MX 4 HRS SAMPLE BOD. 5-DAY ONCE/ **** **** ***** **** **** 38 N/A CALCTD (23)MEASUREMENT PERCENT REMOVAL MONTH REPORT l81010 K 0 0 PERMIT PER-ONCE/ ribinibini NΑ CALCTD RECUIREMENT نىنىن MO AVG CENT MONTH PERCENT REMOVAL SOLIDS. SUSPENDED SAMPLE ONCE/ _____ ***** *** 77 **** ----N/A CALCTD (23)MEASUREMENT PERCENT REMOVAL MONTH l81011 K 0 0 PERMIT REPORT PFR-ONCE/ CALCTD RECUREMENT ***** **** PERCENT REMOVAL MO AVG CENT MONTH NAME / TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH TELEPHONE DATE THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS Craig Woolard, P.E., Ph.D. IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE, I AM AWARE THAT THERE ARE SIGNIFICANT **Director, Treatment Division** PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND SIGNATURE OF PRINCIPAL EXECUTIVE 07/08/09 (907)564-2799 IMPRISONMENT. SEE 18 U.S.C. \$1001 AND 33 U.S.C. \$1319. (Penalties under these statutes may include fines up to TYPED OR PRINTED \$10,000 and or maximum imprisonment of between 6 months and 5 years.) OFFICER OR AUTHORIZED AGENT YEAR MO DAY AREA CODE NUMBER COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) Forms by WindowChem(707)864-0845;p/n11090;v5.01;4/1/96. Rev. 1/05, BN